

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		
	IND	DEP	IND	DEP	IND	DEP	
1							
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49							
50							
TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							

CLAIMS	IND	DEP	IND	DEP	IND	DEP
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61	1					
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100						
TOTAL IND.	4					
TOTAL DEP.	10					
TOTAL CLAIMS	14					